INSTRUCTIONS: This for appropriate. All further cor indicated unless corrected maintenance fee notification CURRENT CORRESPONDENCE 36981 7: FISH & NEAVE ROPES & GRAY	rm should be used forward respondence has below or directed otherwise as. DE ADDRESS (Note: Use Block 1 for 03/01/2005) IP GROUP LLP F THE AMERICAS FL	smitting the ISSUPatent, advance or in Block 1, by (a	ee(s), to: <u>Ma</u> or <u>Fa</u>	ax UBLIC cation new co	Note: A certificate of Fee(s) Transmittal. Th papers. Each additiona have its own certificate	ired). Blocks vill be mailed and/or (b) in mailing can discertificate of mailing or tificate of Mais Fee(s) Tranvith sufficient	I through 5 s to the current dicating a separate only be used from the separate of the separat	or domestic mailings of the for any other accompanying ent or formal drawing, must smission g deposited with the United st class mail in an envelope above or being facsimile	
05/20/2005 HABDELR3 00000023 061075 10691152					Irene Keselman (Depositor's name)				
	10071102			Rene Keselman (Signatu			(Signature)		
01 FC:1501 02 FC:1504	1400.00 DA 300.00 DA				5-16-6	2005		(Date)	
APPLICATION NO.	18.00 DA FILING DATE		FIRST NAMED I	INVEN	TOR	ATTORNEY	DOCKET NO.	CONFIRMATION NO.	
10/691,152	10/21/2003		Gregory	Starr		ALT	`-256	6613	
APPLN. TYPE	ROGRAMMABLE PHASE-	ISSUE F			IBLICATION FEE		EE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$1400		\$300	\$1700		06/01/2005	
						1			
EXAMINER		ART UNIT 2816		CL	ASS-SUBCLASS	l			
NGUYEN			327-147000						
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. FISH & NEAVE IP GROUP Jeffrey H. Ingerma: 2 3						
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT ((print o	r type)				
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appea Γ a substitute fo	ar on tl or filing	he patent. If an assign g an assignment.	ee is identifie	d below, the o	locument has been filed for	
·				RESIDENCE: (CITY and STATE OR COUNTRY)					
Altera Corporation			San Jose, California						
mrcera cor	poracron			,					
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the pat	ent):	☐ Individual Co	orporation or o	other private gr	oup entity Government	
4a. The following fee(s) are	enclosed:	4b	. Payment of Fe	ee(s):					
<u> </u>					nount of the fee(s) is en			•	
					redit card. Form PTO-2038 is attached. is hereby authorized by charge the required fee(s), or credit any overpayment, to				
Advance Order - # of	Copies		Deposit Accou	tor is h unt Nui	nereby authorized by cl nber <u>06-1075</u> *	harge the requence (en	nred fee(s), or close an extra c	credit any overpayment, to copy of this form).	
a. Applicant claims S	(from status indicated above MALL ENTITY status. See	37 CFR 1.27.		nt is no	rder No. 00 longer claiming SMAl	LL ENTITY s	tatus. See 37 C		
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issu ublication Fee (if required) vords of the United States Pate	ne Fee and Publicate vill not be accepted and Trademark	tion Fee (if any) I from anyone o Office.	or to	re-apply any previousl an the applicant; a regi	y paid issue fo stered attorne	e to the applicate or agent; or t	ation identified above. he assignee or other party in	
Authorized Signature	My A X	<u></u>	200		Date	1/15/05	-	<u> </u>	
Typed or printed name _	ngerman				No. 31,				
This collection of informatic an application. Confidential submitting the completed at this form and/or suggestions Box 1450, Alexandria, Virg	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. oplication form to the USPTs for reducing this burden, shinia 22313-1450. DO NOT 1.450	11. The information 122 and 37 CFR O. Time will vary tould be sent to the SEND FEES OR C	on is required to 1.14. This colle depending upo chief Informa COMPLETED F	obtain ection i on the i ation O FORM	or retain a benefit by t s estimated to take 12 r ndividual case. Any co fficer, U.S. Patent and S TO THIS ADDRESS	he public whiminutes to comments on the Trademark OS. SEND TO:	ch is to file (an nplete, including the amount of the ffice, U.S. Dep Commissioner	d by the USPTO to process ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.